Fund 10910 – Office of Women's Health (1000/100970)

The activities under the Office of Women's Health are significant in the Indiana State Department of Health's role to improve the health status of women in Indiana across the life span through assessment of health needs, increased public awareness and education and coordinated development of women's health programming.

The goal of the Office of Women's Health is to become the centralized location for the development of leadership and vision for women's health and other public health programs. The goal will be accomplished by the following objectives:

- To identify, coordinate, and set statewide priorities for women's health programs, services, and resources.
- To educate and advocate for women's health, providing statewide leadership for better access to and financing for health services, preventive screening, treatment services, and health education efforts.
- To seek funding and partnerships from private or governmental entities for programs and initiatives
- To promote programs especially sensitive to the needs of underserved and disadvantaged women and those with special needs.
- To serve as a clearing house for information, current research and data, and to assist policymakers.
- To provide leadership and mentoring opportunities for young women.

Priority initiatives of the Office of Women's Health include heart disease, diabetes, osteoporosis, rape/sexual assault, smoking, and mental health and addictions. The office promotes these initiatives through outreach efforts, community events, health fairs, electronic newsletters, our Web site, community partnerships, and funding of local initiatives.

This program is authorized by IC 16-19-13.

Fund 10940 – Donated Dental Services (1000/101010)

The Indiana State Department of Health, Oral Health Program, a section of Maternal Child Health Services, awarded funds to the National Foundation of Dentistry for the Handicapped – Indiana Donated Dental Services to provide referral assistance to disabled, aged or residents of Indiana, unable to afford dental care or to obtain care through public aid or people with seriously neglected oral health problems who have no other way of obtaining needed care. There is no specific statutory authority for this program. This program provides referral assistance to disabled, aged or residents of Indiana, unable to afford dental care or to obtain care through public aid or people with

seriously neglected oral health problems who have no other way of obtaining needed care.

The National Foundation of Dentistry for the Handicapped (NFDH) – Indiana Donated Dental Services (I-DDS) receives funds from various organizations, including the ISDH, to refer Indiana residents for donated dental services. This is a long-standing program that is strongly endorsed by the Indiana Dental Association (IDA). In the past, the IDA has been very supportive of the mission of the Oral Health Program at the ISDH. Although the NFDH / I-DDS program might be able to sustain some reduction in its funding from the ISDH, any significant reduction might interfere with its ability to provide referral services for a needy segment of the population of Indiana to dentists willing to provide donated dental services.

<u>Fund 11420 – Cancer Education and Diagnosis – Breast Cancer (1000/101530)</u>

The Centers for Disease Control and Prevention's (CDC) National Breast and Cervical Cancer Early Detection Program (NBCCEDP) is a comprehensive public health program that helps uninsured and underserved women gain access to screening services for the early detection of breast and cervical cancer.

The Indiana Breast and Cervical Cancer Program (BCCP) provides clinical breast examinations, mammograms, and Pap tests for eligible women, as well as diagnostic testing for women whose screening outcome is abnormal. State funds are used to reimburse facilities which are enrolled in BCCP for breast diagnostic services.

The eligible population for BCCP breast diagnostic services is women between the ages of 50 and 64 who are low-income (up to 200% of the federal poverty level), and who have no other source of health-care reimbursement, such as insurance.

The program was originally authorized by the state budget bill in 2007.

<u>Fund 11440 – Cancer Education and Diagnosis – Prostate Cancer (1000/101570)</u>

The program was authorized by the state budget bill.

The Indiana Prostate Cancer Initiative (IPCI) addresses the fourth most common cancer in Indiana – prostate cancer – by encouraging informed decision making related to prostate cancer screening throughout the state. IPCI leads statewide efforts to address Indiana's burden of prostate cancer through efforts of the ISDH Comprehensive Cancer Control Program and the Indiana Cancer Consortium – a statewide network of partners implementing the state Cancer Control Plan. Funds support initiatives by a variety of community-based organizations to improve prostate cancer screening practices in men at risk. These initiatives also aim to address the disparate impact of prostate cancer in African-American males.

IPCI also works with the Indiana Cancer Control Plan to provide assistance with evaluation in order to ensure that the state plan objectives are being addressed effectively and efficiently.

Fund 11490 - Sickle Cell (1000/101650)

The Newborn Screening Program ensures that all infants born in Indiana are screened for a variety of disorders, including sickle cell disease, sickle cell trait and other hemoglobinopathies. The Sickle Cell Program is mandated to provide diagnosis, follow-up, management, family counseling, and support services for all infants identified with a hemoglobinopathy. Additionally, the program provides educational outreach to both health care professionals and the general public. To ensure that these services are provided to children with sickle cell disease and sickle cell trait, the program funds one clinic grantee (with a hematologist on staff) and 3 sickle cell education centers.

This program is authorized by IC 16-41-17.

The program's goal is to continue to ensure that all children identified with sickle cell disease or sickle cell traits receive appropriate follow-up services in a timely manner.

Fund 12760 - Department of Health - Administration (1000/104000)

This account supports a variety of traditional public health programs not otherwise funded through federal funds or dedicated state funds, such as health education, nutrition, community hygiene, radiological health, laboratory services, disease epidemiology, vital records, consumer protection, and general sanitation, as well as overall agency administration. The thrust of these efforts is to protect the health, safety, and welfare of the public.

The overall goal of the programs is to assure a quality of life for all Hoosiers. Many of the programs are community-wide in nature while others may focus more directly on a population in need of services, for example nutrition. The mission of the Indiana State Department of Health is to support Indiana's economic prosperity and quality of life by promoting, protecting and providing for the health of Hoosiers in their communities.

This fund is authorized by IC 16-19.

Fund 12785 - SSBG - Maternal & Child Health

Social Services Block Grant Funds for Maternal & Child Health's Healthy Families Division.

Fund 12790 - Cancer Registry (1000/104060)

The Indiana State Health Department (ISDH) is mandated by both state and federal law to maintain a state cancer registry to record all cases of malignant disease and other

pre-cancerous conditions that are diagnosed or treated in Indiana. Data collected is applied to better identify appropriate preventive, control, and treatment measures for cancer and to monitor Indiana's cancer trends and burden.

This program serves all citizens of Indiana. As the population of the state ages, the number of cancer cases will increase, requiring adequate staff to process the increased workload. The goal is to obtain and maintain the highest level of certification according to national cancer registry standards so that complete, accurate, and timely data can be used for research and assessment of the cancer burden in Indiana.

In order for ISDH to be eligible to receive federal funding, the agency uses this as the state match.

This program is authorized by Indiana Code 16-38-2, Federal Public Law 102-515, and Federal Public Law 107-260.

Fund 12880 – Minority Health Initiative (1000/104180)

The mission of the Office of Minority Health (OMH) is to identify and assess the health needs of minorities who experience difficulties accessing preventive and basic health care services. The Office facilitates and coordinates community-based programs tailored to meet the needs of these populations. In addition, the OMH maintains an open dialogue with outside agencies in an effort to keep abreast of concerns, trends and problems as seen by these agencies.

The goal is to continue to meet the goals and objectives established to reduce health disparities in Indiana by making sure that education and programs are available to close the gap.

This program is authorized by Indiana Code 16-46-11.

Fund 13200 – Children with Special Health Care Needs (1000/105140)

The purpose of the Children's Special Health Care Services (CSHCS) program is to provide high quality, comprehensive, family-centered, cultural competent, coordinated care, diagnosis, treatment and rehabilitative referrals/services to Hoosier children and youth with special health care needs. Indiana has approximately 266,494 children and youth with special health care needs in the state; the CSHCS program Care Coordinators provide services to children and their families to assist them in meeting the special needs of their child. The CSHCS program also provides a direct medical care reimbursement safety-net to families with an income no greater than 250% of the federal poverty level. Families exceeding the income level for direct medical care reimbursement receive care coordination services from the program. The program utilizes all other sources of payment, including private insurance and/or Medicaid, before expending state dollars to pay for services.

This program is authorized under IC 16-35-2 and is also in accordance with Title V of the Social Security Act.

Fund 13844 – Area Health Education Centers (1000/106920)

The Indiana Area Health Education Centers (AHEC) Program:

- improves the distribution of Indiana's health care professionals to rural and urban areas and populations most in need of primary care;
- increases the diversity of the health care workforce in order to eliminate health disparities and increase access to health care for minority and disadvantaged populations;
- improves the quality of health care for all Hoosiers.

The Indiana AHEC Program:

- Develops and implements strategies to foster and provide community-based training and education to individuals seeking careers in health professions within underserved areas for the purpose of developing and maintaining a diverse health care workforce that is prepared to deliver high-quality care, with an emphasis on primary care, in underserved areas or for health disparity populations, in collaboration with other Federal and State health care workforce development programs, the State workforce agency, and local workforce investment boards, and in health care safety net sites.
- Prepares individuals to more effectively provide health services to underserved areas and health disparity populations through field placements or preceptorships in conjunction with community-based organizations, accredited primary care residency training programs, federally qualified health centers, rural health clinics, public health departments, or other appropriate facilities.
- Conducts and participates in interdisciplinary training that involves physicians, physician assistants, nurse practitioners, nurse midwives, dentists, psychologists, pharmacists, optometrists, community health workers, public and allied health professionals, or other health professionals, as practicable.
- Delivers or facilitates continuing education and information dissemination programs for health care professionals, with an emphasis on individuals providing care in underserved areas and for health disparity populations.
- Proposes and implements effective program and outcomes measurement and evaluation strategies.
- Develop and implement strategies, in coordination with the applicable one-stop delivery system under section 134(c) of the Workforce Investment Act of 1998, to recruit individuals from underrepresented minority populations or from disadvantaged or rural backgrounds into health professions, and support such individuals in attaining such careers.
- Establish a youth public health program to expose and recruit high school students into health careers, with a focus on careers in public health.

Federal legislative authority for the program is the Comprehensive Health Manpower Training Act (Public Law 92-157), Section 774(a).

Fund 14560 - Project Respect (1000/108510)

Indiana RESPECT (Indiana Reduces Early Sex and Pregnancy by Educating Children and Teens) is the state's teen pregnancy prevention initiative whose mission is to reduce Indiana's teen pregnancy and birth rates. Through partnerships with community-based organizations, Indiana RESPECT provides sexuality education programs with an emphasis on preventing pregnancy and preventing the contraction of sexually transmitted infections (STIs) among young people. Programs stress the benefits of sexual abstinence and delaying pregnancy and parenting during the adolescent and teen years.

Indiana RESPECT has three integral components: 1) a community-based grantee program which supports organizations in the implementation of teen pregnancy prevention and sexuality education programs; 2) training and technical assistance to grantees on topics such as the development of logic models, program adaptation, and evaluation; and 3) a media campaign which consists of educational print materials, TV advertisements, radio PSAs, promotional items, billboards, and a Web site which educate on the benefits of abstinence and the importance of preventing teen pregnancy.

The priority populations to be served with these grant funds include adolescents, both males and females of all races and ethnicities, ages 10-14 or those who are in grades 5-8 as well as adolescents living in the counties with the highest rates of teen pregnancy for females aged 10-19.

In working with its community-based grantees, Indiana RESPECT strives to improve the following outcome measures:

- Reducing the pregnancy rate among the 15-17 year old population.
- Reducing the birth rate among the 15-17 year old population.
- Reducing the incidence of sexually transmitted diseases among adolescents and teens.

Indiana RESPECT also strives to improve the following process outcome measures:

- Improved infrastructure for providing sexuality education and teen pregnancy prevention programs to adolescents and young people.
- Increase knowledge and skills of facilitators of sexuality education and teen pregnancy prevention programs after participating in training and professional development opportunities.

Fund 14670 - HIV/AIDS Services (1000/108620)

The HIV/AIDS Services (HAS) account supports the HIV Care Coordination Program. The primary goals of the HIV Care Coordination Program are to ensure continuity of care and enhance the quality of life for individuals living with HIV. Activities include the coordination of services and the empowerment of individuals to maximize self-care.

The HIV Care Coordination Program provides specialized case management with goaloriented activities to locate, facilitate access to, and monitor the full range of HIV-related services in cooperation with the client. The program encourages the most cost-effective use of medical and community resources and promotes the overall well being of the individual.

For HIV Care Coordination, using these and other funds, the program serves more than 5,000 Hoosiers each year.

These funds are a major component of the Federal "maintenance of effort" (MOE) requirement for Indiana to assure continued Federal support for the Ryan White grant.

Fund 14680 - Test for Drug Afflicted Babies (1000/108630)

The purpose of the Test for Drug Afflicted Babies (Meconium Screening) Program was originally to identify drug-afflicted newborns in order to facilitate early intervention. The Indiana State Department of Health (ISDH) was directed to implement a program to identify drug-afflicted infants and to collect information on the incidence of drug abuse during pregnancy as part of the on-going assessment of maternal and child health in Indiana. Results from ongoing data collection showed that this program did not have the expected results. It did not provide population-based data and less than 50 percent of the babies who met the screening criteria tested positive for alcohol, tobacco or other drug use.

Upon the recommendation of the Prenatal Substance Abuse Commission, the 2009-2010 General Assembly amended the wording of this line item in the state's budget to provide funds for a surveillance study.

<u>Fund 14912 – State Supplement SSBG – Health (1000/109020)</u>

These funds come directly to us instead of first going to DCS as in the past. These funds are utilized to fund two contracts, Aids Task Force and Aids Ministries/Aids Assist of Indiana, both entities that provide HIV/AIDS support services.

Fund 15820 - AIDS Education (1000/121600)

These State funds support the administration of the Indiana HIV/AIDS Prevention Programs at the State Department of Health. The State AIDS Education Program supports State manning-table positions and the day-to-day overhead of the Division of HIV/STD. All other State and Federal HIV/AIDS, Viral and Perinatal Hepatitis Prevention, and STD funds and programs are coordinated through the Division of HIV/STD. Broadly related activities for HIV are monitoring cases of AIDS and the spread of HIV infection in Indiana, predicting the impact of HIV on the population and on the services available to serve the population, and preventing further infection. These

efforts include public and school education, risk avoidance training, counseling and testing, partner notification, recalcitrant carrier follow-up, and provisions for the control of infectious waste. State AIDS Education dollars are a major component of the Federal requirement of a "maintenance of effort" (MOE) by Indiana to assure continued Federal support for the Ryan White grant. HIV/AIDS Services dollars are also a major component of the Federal requirement of the "maintenance of effort" by Indiana to assure continued Federal support. This funding is a major component of the Federal requirement of a "match" by Indiana to assure continued Federal support.

This Program is authorized by Public Law 273-1999

Fund 15960 - State Chronic Diseases (1000/121770)

This fund provides assistance to individuals with various chronic diseases.

<u>Hemophilia</u> – Provides benefits to hemophilia patients with either severe or moderately severe conditions. The program is authorized by Indiana Code 16-41-18.

Renal Disease – The program is authorized by Indiana Code 16-46-8.

Sickle Cell Anemia - The program is authorized by Indiana Code 16-46-7.

<u>Tuberculosis and Refugee</u> – The TB program supports 1 FTE regional TB nurse consultant and a physician several hours per week to assist local health departments with TB control and prevention, and funds educational activities for public health nurses and physicians. The Refugee Health Program serves as a liaison between agencies providing health screening to newly arrived refugees and B1, B2 immigrants. It tracks, trends and monitors health screenings for communicable diseases.

<u>Heart Disease and Stroke Prevention</u> – The HDSP Program will contract to hire a program director and an epidemiologist; develop a State HDSP Plan and a Burden Report; form a state-wide coalition; identify evidence-based health promotion, disease prevention and control programs; and work to eliminate health disparities.

<u>Asthma</u> -- The Asthma Program will sustain interventions that focus on asthma issues related to schools and early child care settings. The funds will be used for asthma education and awareness, safe and healthy environments, and school nurse coordination. These interventions will be based on reaching the goals and objectives of the State Asthma Plan.

Fund 16900 - WIC Supplement (1000/129410)

This is an annual appropriation to the State Department of Health from the general fund for the purpose of providing matching funds for the Women, Infants and Children's Program for Farmers' Market Nutrition Program (FMNP) and for other various WIC program expenses.

The purpose of this program is to provide fresh, unprepared, locally grown fruits and vegetables to WIC participants and to expand the awareness, use of and sales at Indiana farmers' markets. Due to WIC participants limited financial resources; fruits and vegetables are typically the food categories which are lacking in their diet. With increased awareness of farmers' markets, participants also provide a consistent customer base and support local farmers.

The WIC Farmers' Market Nutrition Program serves prenatal, postpartum and breastfeeding women, infants who will turn twelve months of age prior to the end of the season, and children up to their fifth birthday.

The funding is authorized by IC 6-7-1-30.2.

Fund 16910 - Maternal and Child Health Supplement

The Maternal and Child Health (MCH) Supplement is appropriated annually from the State general fund to provide supplementary funding for maternal and child health services. Funds so appropriated must be used to: 1) supplement federal Maternal and Child Health Services Block Grant funds provided under 42 U.S.C. 701 et seg. for the purpose of establishing and maintaining programs of pregnancy care in underserved areas of Indiana; and 2) provide funding for the hospital and medical expenses connected with the delivery of children whose parents are eligible for services that may be covered by funds provided under the federal Maternal and Child Health Services Block Grant Program. The mission of the Maternal and Child Health Division (MCH) is to improve the health status of women, infants, children, and adolescents, and children with special health care needs by: 1) funding accessible preventive and primary health services, social services, and health education to low income, underserved, and at-risk women of reproductive age, children, adolescents, young adults, and children with special health care needs in locations throughout the state and by: 2) promoting familycentered, community-based, coordinated care/local collaboration and networking in order to develop primary care systems for the MCH populations. MCH programs are available to all individuals, but emphasis is placed on targeting women of childbearing age, low-income populations, and those who do not have access to health care.

This program is authorized by Indiana Code 6-7-1-30.2.

Fund 17420 – Aid to County Tuberculosis Hospitals (1000/211600)

The purpose of the Program is to reimburse those hospitals that treat or care for patients who are suspected or confirmed to have Tuberculosis (TB) and have no other source of payment. Evaluating and treating potentially infectious and infectious patients are effective methods of protecting public health by preventing further transmission of the disease. Reimbursement of hospitals that treat these patients is a major cost saving alternative to a TB hospital where these individuals could receive treatment free of charge.

This program covers only the TB related services received by these individuals until they are medically stable and can be discharged without the threat of transmitting TB to the public. It is very difficult to predict how many claims and how much each claim will be, year to year.

This program is authorized by IC 16-21-7-3.

Fund 17610 - Medicare-Medicaid Certification (1000/214070)

The Division of Acute Care, Division of Long Term Care, and Division of Healthcare Education and Quality are responsible for the licensing of health care facilities. The Divisions are also the designated state survey agencies for the Centers for Medicare and Medicaid Services (CMS) under the federal "1864 Agreement" and pursuant to that agreement recommend federal certification to CMS of facilities complying with federal regulations. Most healthcare facility regulations are found in 42 CFR. The Divisions conduct surveys of health care facilities in order to ensure that the facilities meet the minimum requirements for Medicare and Medicaid participation and are in compliance with state licensing requirements. The Medicare / Medicaid Certification Program is responsible in some capacity for 7,916 health care facilities, agencies, or centers.

Acute Care

The Division of Acute Care surveys and licenses under several articles of IC 16. The Division licenses and conducts surveys of 171 hospitals, 130 ambulatory surgery centers, 296 home health agencies, 84 hospice agencies, 38 blood centers, 4 birthing centers, 9 abortion clinics, and 287 personal care services agencies. The Division surveys and recommends to CMS for certification 5,179 laboratories for certification under the Clinical Laboratory Improvement Act (CLIA), 133 end stage renal disease facilities, 55 outpatient rehabilitation facilities, 62 rural health clinics, 3 transplant programs, and 16 psychiatric residential treatment facilities. A total of 28 different types of acute care health care facilities are surveyed under various state and federal laws.

Over the past ten years, the Division of Acute Care has experienced a significant increase in the number of some types of health care facilities. Ambulatory surgery centers and dialysis (ESRD) centers are examples of programs that have grew significantly in numbers and therefore require more staff time for licensing/certification and surveys.

The primary program responsibility is to conduct licensing and/or certification surveys of acute care facilities and complete the licensing and certification process in a timely manner. In the coming biennium, the ISDH will be completing implementation of ambulatory surgery center surveys under the new infection control regulations. The new regulations also increase federal survey frequency from once every six years to once every three years. The second program goal and objectives is to develop and implement health care quality initiatives in support of CMS and state health standards.

Long Term Care

The Division of Long Term Care surveys and licenses under IC 16-28-2 and surveys and recommends for Medicare/Medication certification. The Division licenses and surveys 1,143 facilities to include 505 comprehensive care (nursing homes) facilities, 109 residential care facilities, and 547 Intermediate Care Facilities for the Developmental Disabled. These facilities are surveyed annually to ensure the health and safety of residents.

The primary program responsibilities are to survey and license or recommend for certification all facilities in a timely manner. The second program goal and objectives is to develop and implement health care quality initiatives in support of CMS and state health standards.

Education and Quality

The Division of Healthcare Education and Quality provides support to the Divisions of Acute Care and Long Term Care for staff training, information technology, complaint intake, provider services, and aide registry. The program reviews and approves 103 nurse aide training facilities. The Division also has a primary role in the planning and nursing expertise for state healthcare quality improvement initiatives.

This fund provides the state match for the federal funds that we receive from Medicaid to run this program.

Fund 30416 - Local Health Department Account (6330/100500)

The Indiana local health department trust exists for the purpose of making distributions to each local health department so that health departments may provide services to residents within the city or county.

In using money distributed under this chapter, a local board of health shall give priority to:

 programs that share common goals with the mission statement and long range state plan established by the Indiana tobacco use prevention and cessation board;

- preventive health measures
- support for community health centers that treat low income persons and senior citizens.

The auditor of state shall distribute from the account a total of \$3,000,000.00 with a portion provided to each county auditor in the amount determined by a set formula.

This program is authorized by IC 4-12-7-5.

Fund 30418 – Tobacco Use Prevention and Cessation Program (6330/100600)

The Indiana Tobacco Use Prevention and Cessation Trust Fund (Trust Fund) was created in 2000 as an interest-bearing, non-reverting trust fund, under statutory authority IC 4-12-4-10. The Trust Fund exists to prevent and reduce the use of all tobacco products in Indiana and to protect citizens from exposure to tobacco smoke. Mission critical tobacco control programming includes: emphasis on prevention and reduction of tobacco use by minorities, pregnant women, children, and youth with serious and emotional disturbances; encouragement of smoking cessation; production and distribution of information concerning the dangers of tobacco use and tobacco related diseases; providing research on issues related to reduction of tobacco use; enforcement of laws concerning sales of tobacco to youth and use of tobacco by youth; and other activities that the state department of health considers necessary.

<u>Fund 30420 – Community Health Centers (6330/100700)</u>

Funds were appropriated by the General Assembly for ISDH to provide primary health care services through nonprofit, community-based health centers located in medically underserved areas of the state. Funds from this appropriation support the operation of community health centers throughout the state.

Grants provided to these entities enable uninsured and underinsured individuals to receive care in an appropriate primary care setting rather than a hospital emergency room, thereby creating the best opportunity for many patients to establish a medical home so that care can be managed effectively. As a result, this funding provides the best chance the State's most vulnerable populations have for attaining and maintaining wellness.

Community Health Centers are available to anyone but are particularly critical to populations that have historically had difficulty accessing care including racial and ethnic minorities, refugees, rural residents, migrant workers, and single working poor adults.

In many communities, the state funded community health centers are the only primary health care providers for the uninsured, underinsured and working poor. Continued funding of these centers helps defray the higher costs of deferred primary care that is often borne by hospital emergency departments.

This program is authorized by the budget bill.

Fund 30430 - Prenatal Substance Use & Prevention (6330/101200)

The mission of the Indiana Prenatal Substance Use Prevention Program (PSUPP) is to prevent poor birth outcomes such as birth defects, low birth weight, premature birth, and other ongoing health problems associated with prenatal substance abuse. Substance use during pregnancy is clearly recognized as a major contributing factor to a number of health problems. These can include fetal alcohol syndrome, birth defects, developmental delays and behavior problems.

The goals of PSUPP are:

- To identify high-risk, chemically-dependent pregnant women, provide substance abuse education and counseling, promote substance abstinence, and provide referrals to treatment services and follow-up as needed.
- To facilitate training and education for professionals and paraprofessionals who
 work with women of childbearing age on how to identify high-risk chemicallydependent pregnant women.
- Provide public education on the possible hazards to a fetus when alcohol, tobacco, and other drugs are used during pregnancy.

PSUPP is a three-tiered prevention program funded by the Indiana Division of Mental Health and Addiction (DMHA), the State Legislature through Tobacco Settlement monies (6330/101200) and the Maternal and Child Health Title V Block Grant (61910).

Fund 30431 – Family Health Center of Clark County

Funds were appropriated by the General Assembly for ISDH to provide \$50,000 to the Family Health Center of Clark County.

<u>Fund 30434 – Minority Epidemiology (6330/101400)</u>

The Minority Epidemiology Resource Center was originally authorized and funded by House Bill 1789, 2003 Session. Funding has continued in recent legislative sessions through the budget bill. The center was created to conduct research and provide health data concerning minority populations in Indiana and provide technical assistance to the state department of health and the office of the secretary of family and social services to address the elimination of health disparities among minorities and evaluate health programs focused on minorities. The target population is the approximately 15 % of Indiana residents who are minorities.

Fund 31110 – Adoption Medical History (2060/140010)

The Indiana Adoption History Fund was created by IC 31-19-18-6 to carry out the functions discussed in IC 31-19-18 through IC 31-19-25.5. IC 31-19-20-3 allows ISDH to charge a reasonable fee for the State Registrar's search for medical history information.

The Vital Records Section, Vital Statistics Division, has been the central registry for adoption records for the State of Indiana since the 1940's. Approximately 4,000 children are adopted in Indiana each year and another 1,500 out-of-state adoptions are recorded each year for children born in the state.

Fund 31710 – Local Health Maintenance Fund (2150/140020)

This state fund provides funding to local health departments to provide public health services. Funds can only be applied for the development of new and/or expanded services in ten basic public health areas stipulated in the law, and cannot replace existing funding.

City and county targeted populations are served based on health needs as determined: 1. by a community assessment of need, 2. local health standards, or 3. community need as determined by the staff of the local health department and the local board of health. Funds are allocated to each county based on population as stipulated in the law. Every citizen of Indiana is a potential beneficiary of the programs, especially populations that are medically underserved, have low incomes, or who are chronically ill and the elderly.

This program is authorized by Indiana Code 16-46-10-1.

Fund 31910 – Newborn Screening Program (2170/140030)

The Indiana State Department of Health (ISDH) Newborn Screening (NBS) Program strives to ensure that all infants born in Indiana are tested for forty-five (45) metabolic and/or genetic disorders including phenylketonuria (PKU), galactosemia (GAL), maple syrup urine disease (MSUD), homocystinuria (HCU), hypothyroidism, and hemoglobinopathies (including sickle cell disease). In addition to these forty-five conditions, every infant born in Indiana is also screened for hearing loss. The Newborn Screening Program provides diagnosis, follow-up, management, family counseling and support, and equipment, supplies, formula, and other materials for all infants and individuals diagnosed with any of these conditions. Services within the program also include educational outreach to both health care professionals and the general public.

All infants born in Indiana should have a blood specimen collected from the heel at least 48 hours after birth (heel-stick) for newborn screening. The only acceptable reason for refusing the screen is based on the parents' religious beliefs; parents must sign a waiver indicating informed refusal of the newborn screen. All newborn screening blood specimens, together with required medical and demographic information, are forwarded to the ISDH-designated laboratory for processing. The current laboratory is the Indiana

University Medical Center Newborn Screening Laboratory (IU NBS Lab). The IU NBS Lab reports the results of all screens to the infant's attending physician, the birthing institution (hospital), and the ISDH NBS Program. Unacceptable screens or screens with abnormal results require a repeat screen. If the responsible hospital or physician is unable to obtain the repeat screen, additional follow-up is initiated by the ISDH NBS Program, which may include requesting assistance from local health officials.

The program is authorized by IC 16-41-17.

This program is part of the Genomics and Newborn Screening Section of Maternal and Child Health Services, and works closely with the Sickle Cell Program, the Cystic Fibrosis Program, the Early Hearing Detection and Intervention Program, and the Genomics Program to ensure appropriate and timely follow-up and treatment for infants diagnosed with one of the genetic disorders included on the newborn screen.

Fund 33710 – Radon Gas Trust Fund (2420/140050)

The Radon Gas Trust Fund was established to provide a source of funds for operating a certification program for radon testers, mitigators and laboratories. The individuals desiring certification must complete an education and training program before they become certified. They are also required to provide proof of continuing education before they can be recertified.

The entire population of Indiana is served by this program.

The goal of the program is to ensure that anyone conducting testing, mitigation or laboratory analysis of radon meets certain standards before they can work in Indiana.

The Radon Gas Trust Fund is set up in the Radon Gas Act, IC 16-41-38.

<u>Fund 34610 – Birth Problems Registry (2550/140060)</u>

The Indiana Birth Defects and Problems Registry (IBDPR) is a population-based surveillance system designed to aid in the prevention of birth defects and childhood developmental disabilities and to enhance the quality of life of affected Indiana residents.

Birth defects are conditions present at birth that affect the structure or function of an infant's body. They can cause physical, mental, and medical problems. Some birth defects (such as cleft lip or club foot) are easy to observe, but others (such as heart defects) can only be identified using special tests (such as echocardiograms). About one (1) out of every thirty-three (33) babies in the United States is born with a major birth defect. Birth defects are the leading cause of death in infants. Some of these defects are entirely preventable, while others can be identified early and treated or managed in order to improve the quality of life of affected infants and their families.

Data from the IBDPR is used to detect trends in birth defects and suggest areas for further study; to identify epidemiological factors associated with birth defects; to address community concerns about the environmental effects on birth outcomes; to evaluate education, screening, and prevention programs; and to establish efficient referral systems that provide special services for the children with identified birth defects and their families.

The program is authorized by IC 16-38-4. Through IC 16-37-1-11.5, the program receives \$2 for each search of Vital Records data for a birth certificate.

Fund 34710 – Motor Fuel Inspection Program (2570/140070)

The purpose of this program is to assure accuracy in octane labeling through random sampling of gasoline sold at retail outlets. This program serves all persons buying gasoline. This is a state program, authorized by IC 16-44-3, Inspection, Labeling, and Registration of Motor Fuel and Motor Fuel Outlets.

Approximately 3,220 retail gasoline service stations across Indiana are subject to the law. All retail gasoline service stations are required to register with ISDH and to pay an annual registration fee of \$50. Those fees go into a dedicated motor fuel inspection fund (authorized by IC 16-44-3-10) to be used for administration of the program. Initially, each sample of gasoline had to be collected for analysis by a certified laboratory. Indiana was the first State to utilize a portable octane analyzer for screening of gasoline samples (using the certified laboratory only for those samples that fail the screening test). With the significant increase in fuel costs in recent years, there has been increased public attention for accuracy of fuel pumps and octane levels.

Fund 41266 – State Seniors Farmer Market (3610/104280)

The Indiana WIC Program has received a grant from USDA-FNS for the Seniors Farmers' Market Nutrition Program (SFMNP). The purpose of SFMNP is to provide low income seniors and designated disabled persons with checks to purchase fresh, unprepared, locally grown fruits and vegetables and to expand the awareness, use of and sales at Indiana farmers' markets.

This program is available to seniors over 60 years of age and to designated disabled persons enrolled at select Area Agency on Aging programs in Indiana.

This account supports state funds that are allocated as a match to the Seniors' Famers' Market program. The funding is provided by the Family and Social Services Administration.

Fund 43710 – Water Sample Mail Expense Rotary (5350/140080)

The Indiana State Department of Health (ISDH) Laboratories provide analytical support for public health and environmental programs from ISDH, IDEM, DNR, IBOAH, county health departments, other state agencies and institutions, and samples from the general public. Many of the analyses for chemical and microbiological parameters in drinking water are revenue producing analyses contributing to the rotary account which is critical to support the operating expenses of the laboratory. These specific analyses include the following chemical tests for drinking water: nitrate, nitrite, sodium and fluoride. The microbiological analyses are for the presence/absence of coliform bacteria (Total coliform) and specifically for fecal coliform and E.coli. Effective April 5, 2010, the fee was increased to \$ 10.00/test and a shipping and handling fee of \$ 6.50 per order was instituted to cover shipping costs to the customer if they did not come to the ISDH Lab in person to pick up the kits. Monies collected from Public Water Supplies (PWS) that do not charge for the water they distribute are deposited in this account and help defray the costs of mailing the results and supplying the sample kit and the cost of doing the tests.

Programs, which receive analytical support, involve the complete Indiana population for public health and environmental protection. The ISDH does not charge fees for the analysis of municipal/school fluoride samples, or samples which are scheduled by the county health departments or state agencies/institutions. The ISDH Laboratories provides analytical support for the ISDH divisions of Oral Health, Maternal and Child Health, Consumer Health, Sanitary Engineering and the Epidemiology Resource Center. These samples were judged to be part of an agency program and not fee for service.

Fund 43984 - Non-Profit Grants Fund

Fund that is utilized to allot revenue received from entities that are non-government entities.

Fund 43995 - Public Water Systems Analysis (6000/102150)

This program, Small System Laboratory Assistance Program (SSLAP) is an agreement between the Indiana Department of Environmental Management (IDEM) and the Indiana State Department of Health (ISDH). The program provides a process by which ISDH will perform the laboratory analyses for total coliform bacteria and nitrate/nitrite for all participating public water systems (PWS) in Indiana serving a specific size of a population.

Specific IDEM programs to be covered under this program are as follows: the analytical and monitoring requirements for fecal coliform (or E. Coli) and total coliform under 327 IAC 8-2-8.7; microbiological contaminants - maximum contaminant levels for all public water systems under 327 IAC 8-2-7; collection of samples for total coliform bacteria testing under 327 IAC 8-2-8; repeat monitoring for total coliform bacteria under 327 IAC 8-2-8.1; analytical methods for inorganic chemical testing specifically for nitrate and

nitrite under 327 IAC 8-2-4.2(a)(12)(13) and 8-2-4.2(b); inorganic chemicals – maximum contaminant levels for nitrate and nitrite under 327 IAC 8-2-4(a); and, collection of samples for inorganic chemical testing for nitrate and nitrite under 327 IAC 8-2-4.1.

Fund 46000 - HCFA Civil Money Penalties

The purpose of the civil money penalty (CMP) fund program is to reduce deficient practices in long term care facilities in the state. The CMP fund is established by 42 U.S.C. 1396r(h) and IC 16-28-12-2 to be used to fund educational and training programs designed to aid long term care facilities in reducing or eliminating deficient practices identified by surveys of long term care facilities.

The fund is primarily intended to improve quality of care at the 505 comprehensive care facilities (nursing homes). Other facilities are often included in initiatives in order to address care transition and coordination. The ISDH utilizes the fund to provide evidence-based best practices and resources aimed at improved quality of care.

The goals and objectives for the new biennium for the CMP fund include funding of programs and initiatives to help reduce or eliminate deficiencies in long term care facilities. The ISDH intends to conduct two Healthcare Leadership Conferences per year over the next two years to include the topics of nutrition, abuse and neglect, and patient safety.

Fund 46100 - Black and Minority Health Fair

The core goal of the health fair is to increase minority awareness of chronic diseases, and how to prevent them. Increasing minority awareness of diseases, such as diabetes, heart disease, stroke, hypertension, and cancer is not just the goal of the Office of Minority Health or of the Health Fair. The goal is also at the heart of the Indiana State Department of Health's mission, which is to support Indiana's economic prosperity and quality of life by promoting, protecting and providing for the health of Hoosiers in their communities. Identifying and assessing the health needs of minority populations who experience problems in gaining access to preventive and basic health care helps all of Indiana's citizens.

By tracking self-reported race, ethnicity, socioeconomic status, health behaviors and risk factors researchers can determine causative agents or reasons that morbidity, chronic illness, and mortality differ between particular racial and ethnic subgroups. This allows state health representatives to formulate programs to address these health disparities.

INShape Indiana Black & Minority Health Fair works towards raising public awareness of the health issues that disproportionately affect minorities. It works, by helping the state collect important data on at-risk populations. It works, by offering a wealth of information to pharmaceutical companies on how to better serve the minority

community. And, most importantly, it works towards directly improving the health and well being of the Hoosiers who attend.

Fund 46120 - Immunizations/Vaccines

The Indiana State Department of Health (ISDH) has established a designated vaccine fund for the recovery of the cost of damaged and wasted vaccines. The recovered funds are used to purchase replacement vaccine.

Fund 46300 – Anatomical Gift Organizations (6000/144800)

The purpose of the program is to provide funds to the organ donor organizations. Hoosiers have the option to make a donation when paying their license plate fees. All funds collected are transferred to the Indiana Donation Alliance Foundation pursuant to IC 16-19-3-26.

Fund 46301 - ISDH US DHUD Fund (6000/046300)

Includes all grants that ISDH receives from the Department of Housing and Urban Development.

Fund 46304 – Medicaid Reimbursement (6000/144850)

The health laboratory bills Medicaid for tests/services performed for Medicaid eligible patients and the reimbursement from Medicaid is placed into this fund to support those expenses.

Fund 47930 – Weights and Measures Fund

The ISDH's Weights and Measures Program seeks to ensure that consumers receive full measure when they purchase a product sold by weight, measure, or count. Accurate weights and measures are the basis for all quality control processes used in industry.

An important part of the ISDH Weights and Measures Program is its Metrology Laboratory which tests and calibrates primary and secondary standards for mass, capacity, and length. The Metrology Laboratory houses state standards certified as traceable to those of the federal National Institute of Standards and Technology (NIST). State standards are used as the basis for testing to insure the accuracy of measuring devices in the marketplace.

The ISDH Metrology Laboratory was the sixth state metrology laboratory in the nation to be designated as an Accredited Calibration (Metrology) Laboratory by the National Voluntary Laboratory Accreditation Program (NVLAP) of the National Institute of Standards and Technology (NIST). Indiana is currently only one of seventeen states with NVLAP accreditation. Having an accredited laboratory is important to Indiana.

Many criminal prosecutions and business transactions require items to be certified by an accredited metrology laboratory.

For industries selling internationally, NVLAP certification establishes a traceable link to international weights and measures standards as required by ISO-9000 and ISO Guide 25. This is vitally important to scientific, pharmaceutical, and automobile industries, and to companies doing federal contract work. The fact that Indiana has an accredited metrology laboratory saves Indiana businesses from having to ship out of state and pay out of state costs in order to obtain certification. It also brings in business from regional states and generates business for Indiana companies.

Much of the equipment utilized by the ISDH Weights and Measures Program so sensitive or specialized that they are extremely expensive to purchase and maintain. For that reason the Indiana General Assembly created the Weights and Measures Fund pursuant to IC 16-19-5-4, into which are fees are deposited for the calibrations performed by our metrology laboratory. Those funds can only be used to provide training and equipment for weights and measures inspectors and the state's metrology laboratory.

<u>Fund 53110 – Spinal Cord and Brain Injury (5230/124020)</u>

The State of Indiana established the research fund known as the Spinal Cord and Brain Injury Fund effective July 7, 2007. This fund, established under Indiana Code (IC) 16-41-42.2 consists of appropriations, gifts and bequests, and fees deposited in the fund. The funds are used for the following activities.

- Establish and maintain a state medical surveillance registry for traumatic spinal cord and brain injuries
- Fulfill the duties of the board
- Fund, through grants, research related to treatment and cure of spinal cord and brain injuries

Research grants are awarded annually to projects that have the potential of positively impacting health care costs, returning individuals to the community/workforce, or serve as a stepping stone to further economic opportunities. A scientific review committee assesses proposals and recommends projects to the Board that meet the mission of the fund.

Fund 53510 - Indiana Check-Up Plan - Immunizations (5310/142250)

The Indiana State Department of Health (ISDH) purchases \$11,000,000 in vaccines for childhood immunization programs through this fund center.

The Indiana Check-Up Plan was established by House Bill 1678 in the 2007 legislative session.

Fund 54210 – Lead Accreditation Program (6860/142190)

The Indiana Lead Accreditation, Certification and Enforcement Program certifies individuals to perform and/or supervise lead abatement, lead hazard reduction, and lead investigation and clearance activities. The program approves and monitors state training providers and course curricula. ISDH also administers State certification exams and issues licenses to lead professionals. Program staff conducts compliance inspections of lead hazard control and abatement activities, provides quality assurance reviews of lead investigation activities, audits training courses, and initiates appropriate enforcement action when deemed necessary.

There are currently 767 licensed lead professionals in the State of Indiana that have been served by this program. There are ten (10) licensed training course providers offering over 49 accredited lead courses in Indiana.

It is estimated that the program will generate approximately \$30,000 annually in revenue from licensing fees. All money generated from licensing fees helps to offset costs for programmatic activities.

Fund 61900 – ISDH DOAg Fund

Includes all federal grants that ISDH receives from the Department of Agriculture.

Fund 61910 – ISDH DHHS Fund

Includes all federal grants that ISDH receives from the Department of Health & Human Services.

Fund 61920 - ISDH DOT Fund

Includes all federal grants that ISDH receives from the US Department of Transportation.

Fund 61940 - ISDH DHS Fund

Includes all federal grants that ISDH receives from the Department of Homeland Security.

Fund 61950 – ISDH EPA Fund

Includes all federal grants that ISDH receives from the EPA.